

renal failure patients. It is also known to use calcium compounds having poor solubility at pH 6-9, eg calcium carbonate, hydroxide, oxide and/or sulphate in a medicinal form.--

Page 4, between lines 16 and 17, please insert the following heading:

--Brief Description of the Drawings--

Page 5, delete line 18 and replace with the following:

-- ●-● ALTACITE liquid washed --

Page 5, delete line 24 and replace with the following:

-- ●-● ALTACITE liquid washed --

Page 6, delete line 1 and replace with the following:

-- ▼ALTACITE liquid unwashed --

Page 9, delete the paragraph beginning at line 22 and replace with the following:

--(6) ALTACITE, a hydrotalcite of the same formula as CT 100, commercially available from Roussell, in the form of an aqueous slurry--

Page 10, delete the paragraph beginning at line 13 and replace with the following:

--*Method 3* – Milk (250 ml), cornflakes (50 g), bread (2 slices) and MARMITE (yeast extract) (5 g) were mixed in a stomacher for 30 minutes containing 0.01 M HCl (so as to simulate the conditions in the stomach). A 20 ml aliquot of food was removed and centrifuged. Phosphate was measured in the supernatant. Two grams of the phosphate binder compound was added to the bulk food slurry and mixed for a further 30 minutes. A aliquot of food was taken and the phosphate measured in the supernatant following centrifugation. Further aliquots were taken after a further 30 and 90 minutes mixing.—

Page 10, the paragraph beginning at line 23 should be deleted and replaced with the following:

--In each of the above methods, for each of the compounds (1)-(4), where a dry powder was dosed as the phosphate binder, phosphate binding was measured for a given dosage measured after drying to constant weight at 40°C. Where a wet cake was dosed (or ALTALCITE (6)

added), an amount equivalent to a given constant dry weight at 40°C was used. For known commercially available binders, a given weight of the material supplied was used.--

Page 13, delete the paragraph beginning at line 4 and replace with the following:

--The compounds Mg:Fe 2:1 (1), Ca:Fe 3:1 (2) and CT100 (5) all bound up to 60-70% of the phosphate. Interestingly, the CT100 bound -- 50% more phosphate at any weight than the ALTACITE (6), despite an identical molecular formulae.--

Page 13, delete the paragraph beginning at line 15 and replace with the following:

--At pH 7, the Mg:Fe 3:1 compound (2) was the best phosphate binder over the range of weights studied. The CT100 (5) bound at least twice as much phosphate than the ALTACITE (6) at any weight studied.--

Page 16, delete the paragraph beginning at line 7 and replace with the following:

--The metals in the solutions/suspensions described in Table 2 were precipitated at the same time by the addition of sodium hydroxide. A preparation was also made by precipitating the calcium and iron separately with sodium hydroxide, the precipitates were then mixed. For this, $\text{Fe}_2(\text{SO}_4)_3$ (1 mole) and NaOH (6 moles) were mixed in 4 litres deionised H_2O . In a separate 4 litres of water, CaSO_4 (6 moles), NaOH (12 moles) and Na_2CO_3 (5 moles) were mixed. These two suspensions were then fed into the flask with an overflow at ~2 litres and constantly mixed.--

Page 39, delete the paragraph beginning at line 3 and replace with the following:

--Urine and serum aluminum concentrations were measured using graphite furnace atomic absorption spectroscopy. For the animals taking $\text{Al}(\text{OH})_3$ or CT100, mean serum aluminum concentrations were not significantly higher than serum aluminum from control animals (Table 12). Surprisingly, animals treated with CTFeCa and CTFeMg showed the highest mean serum aluminum concentrations, both significantly higher than animals treated with $\text{Mg}(\text{OH})_2$, $\text{Al}(\text{OH})_3$, CaCO_3 or controls.--

See the attached Appendix for the changes made to effect the above paragraphs.